

PROJECT 10073 RECORD

1. DATE - TIME GROUP 8 October 65 08/2015Z	2. LOCATION Manhattan, New York
3. SOURCE Civilian	10. CONCLUSION A/C
4. NUMBER OF OBJECTS One	
5. LENGTH OF OBSERVATION 1 minute	11. BRIEF SUMMARY AND ANALYSIS Observer was inside looking out the window when he observed the object. No sound. Very bright sparkling silver. Object was reflecting a lot of light and bright. Object moved behind a building. Moved in a straight line. Either reflection on window or some object outside such as A/C. More likely A/C since disappearance reportedly beyond building.
6. TYPE OF OBSERVATION Ground-Visual	
7. COURSE North	
8. PHOTOS <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
9. PHYSICAL EVIDENCE <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

34. Date you completed this questionnaire:

16

Day

October

Month

1965

Year

35. Information which you feel pertinent and which is not adequately covered in the specific points of the questionnaire or a narrative explanation of your sighting.

I happened to glance out the window & I saw this oval silvery object in the East flying from South to North very quickly. It was reflecting a lot of light & was very bright. I watched it till it went behind a building.

[REDACTED]
Bronx, New York 10462

October 10, 1965

Department of Defense

Washington D.C.

Dear Sirs,

On Friday, the 8th of this month at about 5:15PM over Manhattan I saw some kind of flying object which didn't appear to be a plane, blimp, etc. It was a fairly large, silverish oval object. It flew very fast and below the cloud cover. Could your department confirm the sighting. Could you also send me some information about past UFO sightings.

Thank you very much.

Respectfully,

[REDACTED]
[REDACTED]
[REDACTED]

DEPARTMENT OF THE AIR FORCE
WASHINGTON

OFFICE OF THE SECRETARY

Dear [REDACTED]

Attached is FTD Form 164 which is used for reporting observations of unidentified flying objects to the Air Force. In order for the Air Force to evaluate these reports, this form should be completed as fully as possible and returned to this office.

Sincerely,

Sara Hunt

SARA HUNT
Community Relations Division
Office of Information

1 Atch
FTD Form 164

[REDACTED]
Bronx, New York 10462

[REDACTED]
Bronx N.Y. 10462



4FO's
Dept. of the Air Force
Office of the Secretary
United States Air Force
Washington DC

U.S. AIR FORCE TECHNICAL INFORMATION

This questionnaire has been prepared so that you can give the U.S. Air Force as much information as possible concerning the unidentified aerial phenomenon that you have observed. Please try to answer as many questions as you possibly can. The information that you give will be used for research purposes. Your name will not be used in connection with any statements, conclusions, or publications without your permission. We request this personal information so that if it is deemed necessary, we may contact you for further details.

1. When did you see the object?

8 October 1965
Day Month Year

2. Time of day:

5 : 15
Hour Minutes

(Circle One): A.M. or P.M.

3. Time Zone:

(Circle One): a. Eastern
b. Central
c. Mountain
d. Pacific
e. Other _____

(Circle One): a. Daylight Saving
b. Standard

4. Where were you when you saw the object?

[Redacted]
Nearest Postal Address

Manhattan
City or Town

N.Y.
State or County

5. How long was object in sight? (Total Duration)

Hours Minutes Seconds

a. Certain

c. Not very sure

b. Fairly certain

d. Just a guess

5.1 How was time in sight determined?

Not sure, but it was an approximation

5.2 Was object in sight continuously?

Yes ✓ No _____

6. What was the condition of the sky?

DAY

a. Bright
b. Cloudy

NIGHT

a. Bright
b. Cloudy

7. IF you saw the object during DAYLIGHT, where was the SUN located as you looked at the object?

(Circle One): a. In front of you
b. In back of you
c. To your right

d. To your left
e. Overhead
f. Don't remember

8. IF you saw the object at NIGHT, what did you notice concerning the STARS and MOON?

8.1 STARS (Circle One):

- a. None
- b. A few
- c. Many
- d. Don't remember

8.2 MOON (Circle One):

- a. Bright moonlight
- b. Dull moonlight
- c. No moonlight - pitch dark
- d. Don't remember

9. What were the weather conditions at the time you saw the object?

CLOUDS (Circle One):

- a. Clear sky
- b. Hazy
- ☒ c. Scattered clouds
- d. Thick or heavy clouds

WEATHER (Circle One):

- ☒ a. Dry
- b. Fog, mist, or light rain
- c. Moderate or heavy rain
- d. Snow
- e. Don't remember

10. The object appeared: (Circle One):

- ☒ a. Solid
- b. Transparent
- c. Vapor
- d. As a light
- e. Don't remember

11. If it appeared as a light, was it brighter than the brightest stars? (Circle One):

- a. Brighter
- b. Dimmer
- c. About the same
- d. Don't know

11.1 Compare brightness to some common object:

little brighter than an airplane reflecting sun's light

12. The edges of the object were:

- (Circle One):
- a. Fuzzy or blurred
 - ☒ b. Like a bright star
 - c. Sharply outlined
 - d. Don't remember

e. Other _____

13. Did the object:

(Circle One for each question)

- | | | | |
|---|-----|-------------------------------------|------------|
| a. Appear to stand still at any time? | Yes | <input checked="" type="radio"/> No | Don't know |
| b. Suddenly speed up and rush away at any time? | Yes | <input checked="" type="radio"/> No | Don't know |
| c. Break up into parts or explode? | Yes | <input checked="" type="radio"/> No | Don't know |
| d. Give off smoke? | Yes | <input checked="" type="radio"/> No | Don't know |
| e. Change brightness? | Yes | <input checked="" type="radio"/> No | Don't know |
| f. Change shape? | Yes | <input checked="" type="radio"/> No | Don't know |
| g. Flash or flicker? | Yes | <input checked="" type="radio"/> No | Don't know |
| h. Disappear and reappear? | Yes | <input checked="" type="radio"/> No | Don't know |

14. Did the object disappear while you were watching it? If so, how?

Yes, it flew behind a building

15. Did the object move behind something at any time, particularly a cloud?

(Circle One):

Yes

No

Don't Know.

IF you answered YES, then tell what

it moved behind:

a building

16. Did the object move in front of something at any time, particularly a cloud?

(Circle One):

Yes

No

Don't Know.

IF you answered YES, then tell what

in front of:

I think it flew under the cloud cover.

17. Tell in a few words the following things about the object:

a. Sound no sound

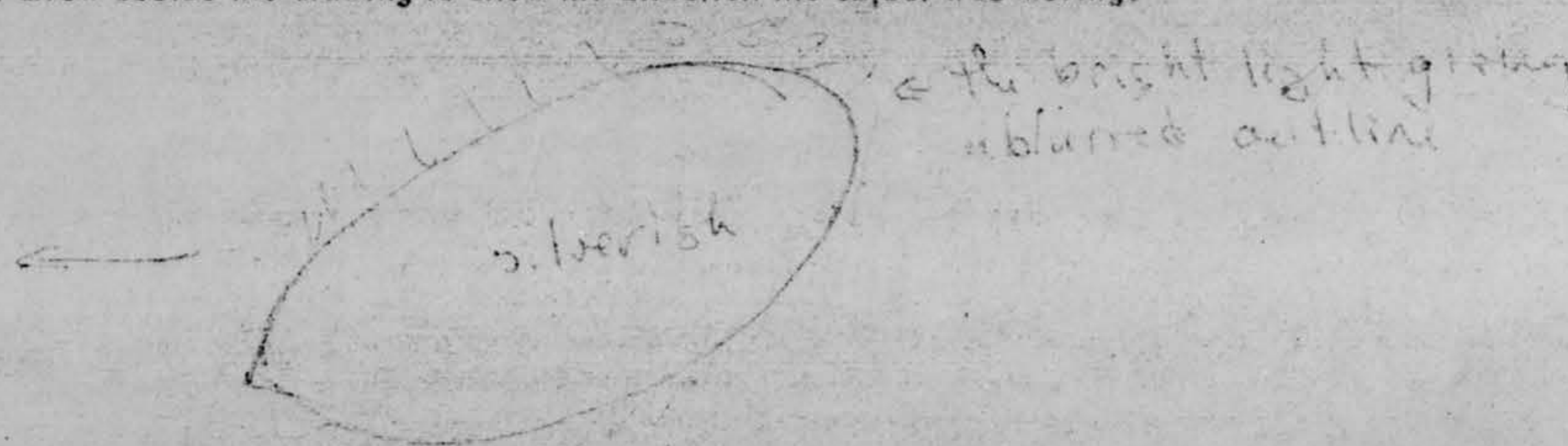
b. Color a very bright sparkling silver

18. We wish to know the angular size. Hold a match stick at arm's length in line with a known object and note how much of the object is covered by the head of the match. If you had performed this experiment at the time of the sighting, how much of the object would have been covered by the match head?

$\frac{1}{2}$ - $\frac{3}{4}$ of it.

probably around

19. Draw a picture that will show the shape of the object or objects. Label and include in your sketch any details of the object that you saw such as wings, protrusions, etc., and especially exhaust trails or vapor trails. Place an arrow beside the drawing to show the direction the object was moving.



20. Do you think you can estimate the speed of the object?

(Circle One) ☒ Yes ☐ No

IF you answered YES, then what speed would you estimate? 800 mph

21. Do you think you can estimate how far away from you the object was?

(Circle One) ☒ Yes ☐ No

IF you answered YES, then how far away would you say it was? 20 miles

22. Where were you located when you saw the object?

(Circle One):

- ☒ a. Inside a building
- ☐ b. In a car
- ☐ c. Outdoors
- ☐ d. In an airplane (type)
- ☐ e. At sea
- ☐ f. Other _____

23. Were you (Circle One)

- ☒ a. In the business section of a city?
- ☐ b. In the residential section of a city?
- ☐ c. In open countryside?
- ☐ d. Near an airfield?
- ☐ e. Flying over a city?
- ☐ f. Flying over open country?
- ☐ g. Other _____

24. IF you were MOVING IN AN AUTOMOBILE or other vehicle at the time, then complete the following questions:

24.1 What direction were you moving? (Circle One)

- | | | | |
|--------------|--------------|--------------|--------------|
| a. North | c. East | e. South | g. West |
| b. Northeast | d. Southeast | f. Southwest | h. Northwest |

24.2 How fast were you moving? _____ miles per hour.

24.3 Did you stop at any time while you were looking at the object?

(Circle One) ☐ Yes ☐ No

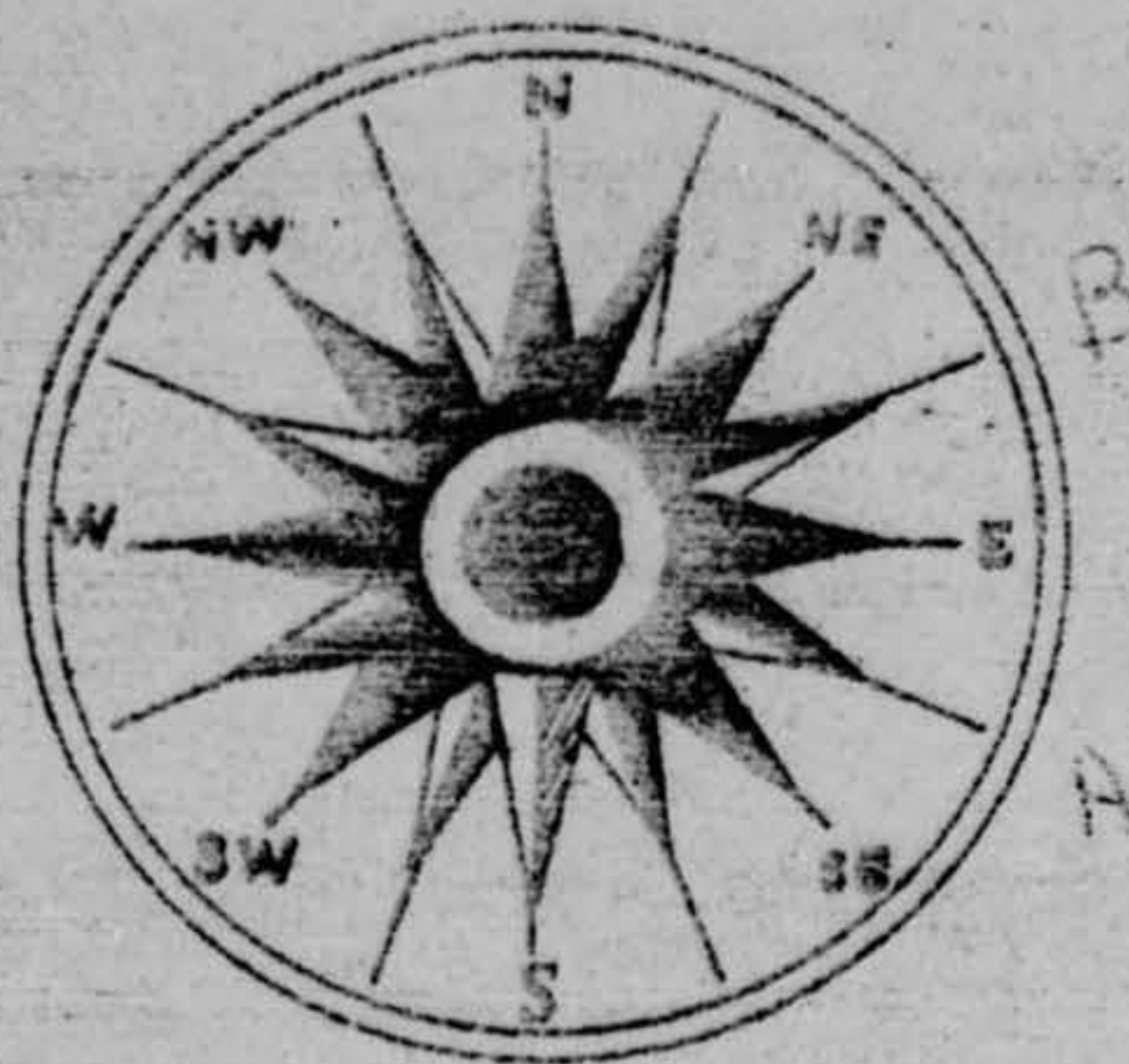
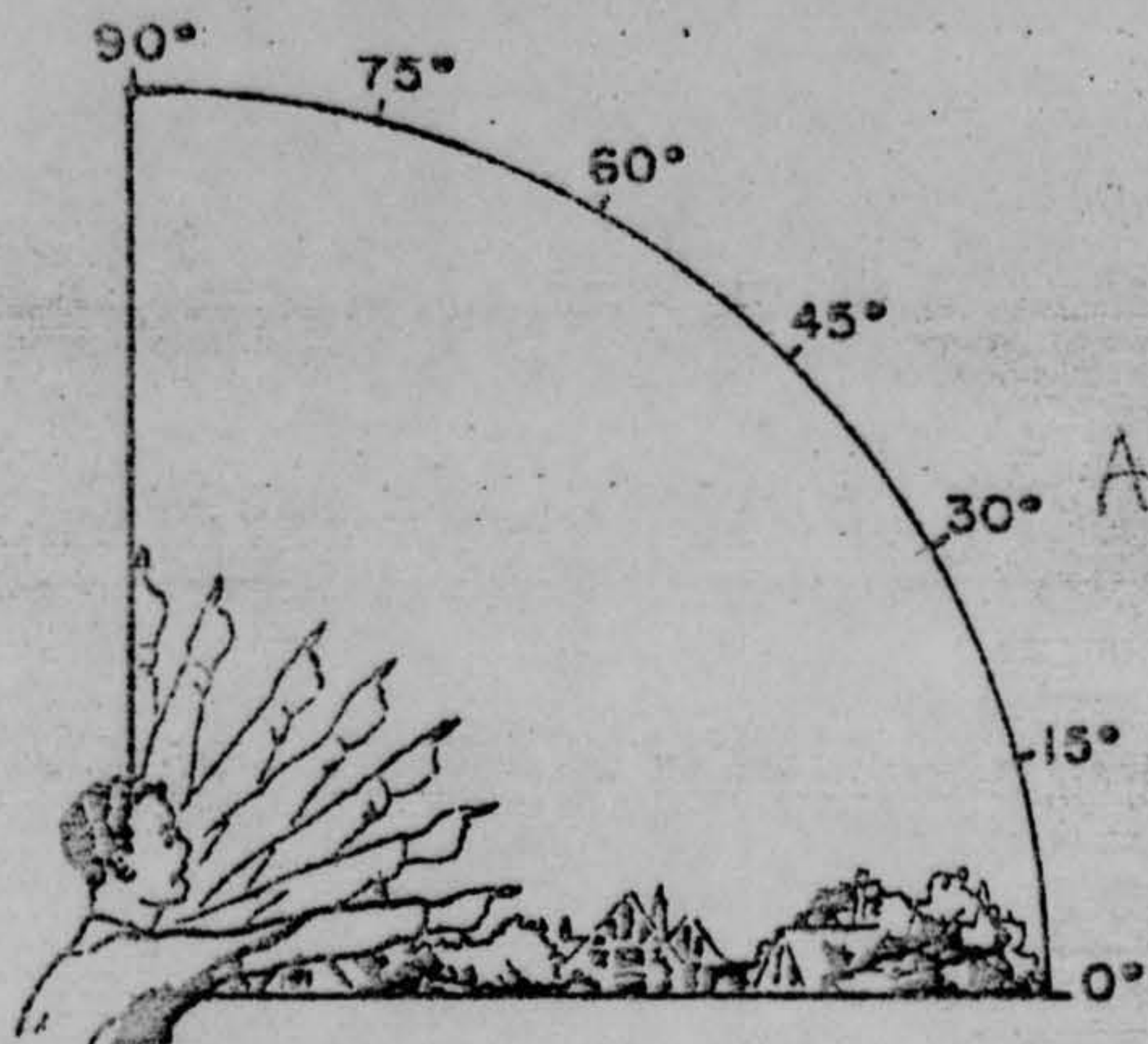
25. Did you observe the object through any of the following?

- | | | | | | |
|-----------------|--------------------------------------|-------------------------------------|---------------|---------------------------|-------------------------------------|
| a. Eyeglasses | <input checked="" type="radio"/> Yes | <input type="radio"/> No | e. Binoculars | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| b. Sun glasses | <input type="radio"/> Yes | <input checked="" type="radio"/> No | f. Telescope | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| c. Windshield | <input type="radio"/> Yes | <input checked="" type="radio"/> No | g. Theodolite | <input type="radio"/> Yes | <input checked="" type="radio"/> No |
| d. Window glass | <input checked="" type="radio"/> Yes | <input type="radio"/> No | h. Other | _____ | |

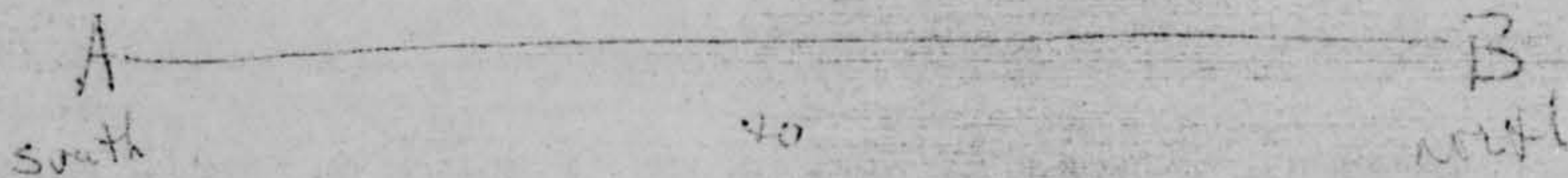
26. In order that you can give as clear a picture as possible of what you saw, describe in your own words a common object or objects which, when placed up in the sky, would give the same appearance as the object which you saw.

No common object, just an oval object very bright from reflected sunlight.

27. In the following sketch, imagine that you are at the point shown. Place an "A" on the curved line to show how high the object was above the horizon (skyline) when you *first* saw it. Place a "B" on the same curved line to show how high the object was above the horizon (skyline) when you *last* saw it. Place an "A" on the compass when you *first* saw it. Place a "B" on the compass where you *last* saw the object.



28. Draw a picture that will show the motion that the object or objects made. Place an "A" at the beginning of the path, a "B" at the end of the path, and show any changes in direction during the course.



29. IF there was MORE THAN ONE object, then how many were there? _____
Draw a picture of how they were arranged, and put an arrow to show the direction that they were traveling.

30. Have you ever seen this, or a similar object before. If so give date or dates and location.

No

31. Was anyone else with you at the time you saw the object? (Circle One)

Yes

No

31.1 IF you answered YES, did they see the object too? (Circle One)

Yes

No

31.2 Please list their names and addresses:

32. Please give the following information about yourself:

NAME

Last Name

First Name

Middle Name

ADDRESS

Street

City

Zone

State

TELEPHONE NUMBER

AGE

SEX

Indicate any additional information about yourself, including any special experience, which might be pertinent.

33. When and to whom did you report that you had seen the object?

from the 8th - today October

1965

Day

Month

Year

to almost all my friends
to the Defense Dept
the NIA & P.